

happens to be about five times their projected profits and three times what they are going to pay out in bonuses.

They got \$13 billion from AIG after we gave AIG \$80 billion to pay off bad debts. They changed into a bank-holding company magically, but are exempt from bank-holding company rules, and got another 50-or-so billion dollars of subsidies out of the Federal Treasury.

What a wonderful system this is. They are creating tremendous wealth. They are an engine of growth. They have recovered from the recession. All hail Goldman Sachs.

DEMOCRATS PLAN TO PAY FOR HEALTH CARE REFORM ON BACKS OF PATIENTS

(Mr. GINGREY of Georgia asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. GINGREY of Georgia. Madam Speaker, the Democrats plan to pay for health care reform on the backs of my patients, many of whom are now senior citizens. Our seniors have suffered tremendously since the recession began. Their 401(k)s are now 201(k)s.

However, my Democratic colleagues don't think seniors have paid enough this year. Now they are asking our seniors to foot the bill for health insurance reform by cutting the Medicare program by \$500 billion.

These cuts will result in seniors losing benefits under Medicare Advantage, programs such as vision, dental, hearing, and even annual checkups, Madam Speaker. These cuts will result in longer wait times and make it harder for senior patients to find a doctor that will see them at all. Worst of all, these cuts will ensure it will be harder to fix Medicare, which it surely will, in 7 years.

Madam Speaker, my patients must not be used to foot the bill for health care reform.

HONORING OKLAHOMA'S SUPERINTENDENT OF EDUCATION, SANDY GARRETT

(Mr. BOREN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. BOREN. Madam Speaker, I rise to honor one of Oklahoma's most respected political leaders, Sandy Garrett.

Born and raised in my hometown of Muskogee, Oklahoma, Sandy Garrett has been Oklahoma's superintendent of public instruction for the past 19 years. As chief executive officer of the State Department of Education, Superintendent Garrett has led the implementation of major education reforms such as Oklahoma's Education Reform Act of 1990, the Federal No Child Left Behind Act of 2001 and the Achieving Classroom Excellence Act of 2005.

In 2006, she was re-elected overwhelmingly for the fifth time. Super-

intendent Garrett is the only woman in Oklahoma history to hold the office.

Her strong character and steady leadership have served, and continue to serve, multiple generations of Oklahoma school children.

Sandy Garrett, because of your commitment to public service, Oklahoma continues to be a great State to live and work in.

SENIORS WILL SEE REDUCED BENEFITS UNDER NEW HEALTH CARE PLAN

(Mr. ROE of Tennessee asked and was given permission to address the House for 1 minute.)

Mr. ROE of Tennessee. Madam Speaker, as a doctor, I see the health care reform debate a little differently than many of my colleagues. When people talk about cost savings and different health care plans, they are really talking about access to care for my patients. There is an immediate and long-term problem for patients' access under the Democrats' plan.

In the near term, 20 percent of our seniors will see reduced benefits. It's not credible to say that we are not cutting Medicare benefits when, in fact, we are. These so-called reforms seem incredibly short-sighted to me in light of the fact that they will decrease access to care.

Over the longer term, H.R. 3200 will force further cutbacks in care as cost savings fail to materialize. Why am I so confident of this outcome? Because I heard the same promises, the same predictions to my patients under TennCare, our State's Medicaid experiment that failed spectacularly. Care was rationed and enrollment for the program was closed, and that hurt our patients. We simply cannot allow these cutbacks to harm patient care.

I urge all Members to go back to their districts and talk to their doctors and patients. I think they will hear a different story and remedy for our health care system than the one the Democrats are trying to prescribe.

CLEAN MONEY, CLEAN ELECTIONS

(Mr. ARCURI asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. ARCURI. Madam Speaker, across the country, hardworking Americans are tightening their belts and pinching pennies in order to provide for their families, as well as working to improve our economy. While the issues of health care and the economy dominate our attention, as they should right now, we should still be mindful of the importance of campaign finance reform.

Campaign finance reform is a necessity if we are going to truly have a democracy that allows individuals to enter the political forum based on their skills and acumen rather than on their bank accounts.

In the last decade, an alliance of advocacy groups, the Fair Elections Coalition, has been working to implement a public campaign finance system on the State level known as Clean Money, Clean Elections. Already, some form of Clean Money, Clean Elections is law in seven States, and over 200 State officials have won their races using this system.

As a Member of Congress, we need to remember that we serve the people of this country based on issues, not dollars. I would ask that my colleagues join me as we push towards reforming the campaign finance system across the board.

HEALTH COSTS HIGH BECAUSE WE HAVE \$800 BILLION OF WASTE IN SYSTEM

(Mr. TIM MURPHY of Pennsylvania asked and was given permission to address the House for 1 minute.)

Mr. TIM MURPHY of Pennsylvania. Madam Speaker, health care costs are not high because people have health insurance. They are high because we have \$800 billion of waste in the system. Now our friends in the Senate are proposing to increase taxes on health insurance.

When workers such as ironworkers and steelworkers and communication workers and the IBEW negotiate their pay package, they work to make sure that their health care plan is covered. Too often now they find that they don't take a raise because their health insurance is going up in cost. They worked to have lower copays, lower deductibles, to have vision, dental, mental health services, among others.

But now we are talking about taxing these plans. What we need to do is figure out ways we can actually lower health care costs instead of discouraging people from having health insurance.

After all, isn't this what we are supposed to be trying to do? The communication workers alone are being told that these new proposals may cost their workers about a thousand dollars more per year in taxes.

This is the wrong approach. It's not good health care. As someone who has practiced in the health care field, I am telling you, it's bad medicine.

EXPAND TAX CREDIT FOR FIRST-TIME HOMEBUYERS

(Mr. MITCHELL asked and was given permission to address the House for 1 minute.)

Mr. MITCHELL. Madam Speaker, I rise today on behalf of thousands of constituents in my district who are still struggling to cope with the housing crisis.

Arizona consistently ranks among the Nation's top three States in foreclosures. As a former mayor and a homeowner, I recognize the negative impact foreclosures have on home values and neighborhoods.